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FROM: Charles D. Holland

DATE: October 25, 2005

Number of pages with cover page:	18	
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Preparer of this slip has confirmed that facsimile number given is correct: 9369/cgm1

Comments:

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Comments: **RESPONSE TO NON-FINAL OFFICE ACTION**

DOCKET NO.: 282172000810

GROUP ART UNIT: 1631

EXAMINER: M. Miller

SERIAL NO.: 09/872,384

FILING DATE: June 1, 2001

INVENTOR(S): Derek J. Hei

TITLE: METHODS AND DEVICES FOR THE REMOVAL OF PSORALENS FROM BLOOD PRODUCTS

Papers attached:

1. Transmittal (1 page)
2. Fee Transmittal w/duplicate copy for fee processing (2 pages)
3. Petition for Extension of Time (1 page)
4. Amendment/Response (13 pages)

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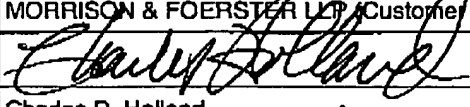
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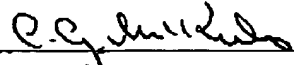
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TRANSMITTAL FORM <i>(to be used for all correspondence after initial filing)</i>	Application Number	09/872,384	
	Filing Date	June 1, 2001	
	First Named Inventor	Derek J. HEI	
	Art Unit	1631	
	Examiner Name	M. Miller	
Total Number of Pages in This Submission	17	Attorney Docket Number	282172000810

ENCLOSURES (Check all that apply)		
<input checked="" type="checkbox"/> Fee Transmittal Form + duplicate for fee processing (2 pages) <input type="checkbox"/> Fee Attached <input checked="" type="checkbox"/> Amendment/Reply (13 pages) <input type="checkbox"/> After Final <input type="checkbox"/> Affidavits/declaration(s) <input checked="" type="checkbox"/> Extension of Time Request (1 page) <input type="checkbox"/> Express Abandonment Request <input type="checkbox"/> Information Disclosure Statement <input type="checkbox"/> Certified Copy of Priority Document(s) <input type="checkbox"/> Reply to Missing Parts/Incomplete Application <input type="checkbox"/> Reply to Missing Parts under 37 CFR 1.52 or 1.53	<input type="checkbox"/> Drawing(s) <input type="checkbox"/> Licensing-related Papers <input type="checkbox"/> Petition <input type="checkbox"/> Petition to Convert to a Provisional Application <input type="checkbox"/> Power of Attorney, Revocation Change of Correspondence Address <input type="checkbox"/> Terminal Disclaimer <input type="checkbox"/> Request for Refund <input type="checkbox"/> CD, Number of CD(s) _____ <input type="checkbox"/> Landscape Table on CD	<input type="checkbox"/> After Allowance Communication to TC <input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences <input type="checkbox"/> Appeal Communication to TC (Appeal Notice, Brief, Reply Brief) <input type="checkbox"/> Proprietary Information <input type="checkbox"/> Status Letter <input checked="" type="checkbox"/> Other Enclosure(s) (please identify below): Fax cover sheet
Remarks		

SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT			
Firm Name	MORRISON & FOERSTER LLP (Customer No. 25226)		
Signature			
Printed name	Charles D. Holland		
Date	October 25, 2005	Reg. No.	35,196

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PTO/SB/17 (12-04v2)

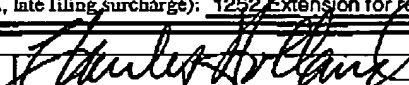
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Effective on 12/09/2004. Fees pursuant to the Consolidated Appropriations Act, 2005 (H.R. 4818). FEE TRANSMITTAL For FY 2005		Complete if Known	
<input type="checkbox"/> Applicant claims small entity status. See 37 CFR 1.27		Application Number 09/872,384	Filing Date June 1, 2001
TOTAL AMOUNT OF PAYMENT (\$) 450.00		First Named Inventor Derek J. HEI	Examiner Name M. Miller
		Art Unit 1631	Attorney Docket No. 282172000810

METHOD OF PAYMENT (check all that apply)	
<input type="checkbox"/> Check <input type="checkbox"/> Credit Card <input type="checkbox"/> Money Order <input type="checkbox"/> None <input type="checkbox"/> Other (please identify): _____	
<input checked="" type="checkbox"/> Deposit Account Deposit Account Number: <u>03-1952</u> Deposit Account Name: <u>Morrison & Foerster LLP</u>	
For the above-identified deposit account, the Director is hereby authorized to: (check all that apply)	
<input checked="" type="checkbox"/> Charge fee(s) indicated below	<input type="checkbox"/> Charge fee(s) indicated below, except for the filing fee
<input type="checkbox"/> Charge any additional fee(s) or underpayment of fee(s) under 37 CFR 1.16 and 1.17	<input checked="" type="checkbox"/> Credit any overpayments

FEE CALCULATION							
1. BASIC FILING, SEARCH, AND EXAMINATION FEES							
Application Type	FILING FEES		SEARCH FEES		EXAMINATION FEES		Fees Paid (\$)
	Fee (\$)	Small Entity Fee (\$)	Fee (\$)	Small Entity Fee (\$)	Fee (\$)	Small Entity Fee (\$)	
Utility	300	150	500	250	200	100	
Design	200	100	100	50	130	65	
Plant	200	100	300	150	160	80	
Reissue	300	150	500	250	600	300	
Provisional	200	100	0	0	0	0	
2. EXCESS CLAIM FEES							
Fee Description							Small Entity Fee (\$)
Each claim over 20 (including Reissues)							25
Each independent claim over 3 (including Reissues)							100
Multiple dependent claims							180
Total Claims 24		Extra Claims - 25 = 0		Fee (\$) 50.00		Fee Paid (\$) 0.00	
Indep. Claims 2		Extra Claims - 3 = 0		Fee (\$) 200.00		Fee Paid (\$) 0.00	
3. APPLICATION SIZE FEE If the specification and drawings exceed 100 sheets of paper (excluding electronically filed sequence or computer listings under 37 CFR 1.52(e)), the application size fee due is \$250 (\$125 for small entity) for each additional 50 sheets or fraction thereof. See 35 U.S.C. 41(a)(1)(G) and 37 CFR 1.16(s).							
Total Sheets - 100 = _____		Extra Sheets /50 _____		Number of each additional 50 or fraction thereof _____		Fee (\$) _____	
				(round up to a whole number) x _____		Fee Paid (\$) _____	
4. OTHER FEE(S)							
Non-English Specification, \$130 fee (no small entity discount)							
Other (e.g., late filing surcharge): 1252 Extension for response within second month							450.00

SUBMITTED BY			
Signature 	Registration No. (Attorney/Agent) 35,196	Telephone (650) 813-5832	
Name (Print/Type) Charles D. Holland		Date October 25, 2005	

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